

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L17000216316
FILED 8:00 AM
October 18, 2017
Sec. Of State
jareyes

Article I

The name of the Limited Liability Company is:
INSIGHT ANALYSIS AND RESEARCH LLC

Article II

The street address of the principal office of the Limited Liability Company is:
13727 SW 152 STREET
UNIT 715
MIAMI, FL. US 33177

The mailing address of the Limited Liability Company is:
13727 SW 152 STREET
UNIT 715
MIAMI, FL. US 33177

Article III

The name and Florida street address of the registered agent is:
SRSL MANAGEMENT, INC
4101 PINE TREE DRIVE
UNIT 1530
MIAMI BEACH, FL. 33140

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: SHIMON GOLDBERGER

Article IV

The name and address of person(s) authorized to manage LLC:

Title: AMBR
ALON OMRI GURLAVIE
5 HABARZEL STREET
TEL AVIV, IL. 6971002 IL

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Article V

The effective date for this Limited Liability Company shall be:

10/18/2017

Signature of member or an authorized representative

Electronic Signature: ALON OMRI GURLAVIE

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

FILED

DOCUMENT# L17000216316

Entity Name: INSIGHT ANALYSIS AND RESEARCH LLC

Apr 29, 2018
Secretary of State
CC7019620262

Current Principal Place of Business:

13727 SW 152 STREET
UNIT 715
MIAMI, FL 33177

Current Mailing Address:

13727 SW 152 STREET
UNIT 715
MIAMI, FL 33177 US

FEI Number: 82-3194031

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SRSL MANAGEMENT, INC
4101 PINE TREE DRIVE
UNIT 1530
MIAMI BEACH, FL 33140 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name GURLAVIE, ALON OMRI
Address 5 HABARZEL STREET
City-State-Zip: TEL AVIV IL 69710-02

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GUR LAVIE ALON OMRI

CEO

04/29/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED

DOCUMENT# L17000216316

Entity Name: INSIGHT ANALYSIS AND RESEARCH LLC

Jan 21, 2019
Secretary of State
6862582279CC

Current Principal Place of Business:

13727 SW 152 STREET
UNIT 715
MIAMI, FL 33177

Current Mailing Address:

13727 SW 152 STREET
UNIT 715
MIAMI, FL 33177 US

FEI Number: 82-3194031

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SRSL MANAGEMENT, INC
4101 PINE TREE DRIVE
UNIT 1530
MIAMI BEACH, FL 33140 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name GURLAVIE, ALON OMRI
Address 5 HABARZEL STREET
City-State-Zip: TEL AVIV IL 69710-02

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALON OMRI GUR LAVIE

OWNER

01/21/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED

DOCUMENT# L17000216316

Entity Name: INSIGHT ANALYSIS AND RESEARCH LLC

Jan 20, 2020
Secretary of State
2698172841CC

Current Principal Place of Business:

13727 SW 152 STREET
UNIT 715
MIAMI, FL 33177

Current Mailing Address:

13727 SW 152 STREET
UNIT 715
MIAMI, FL 33177 US

FEI Number: 82-3194031

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SRSL MANAGEMENT, INC
4101 PINE TREE DRIVE
UNIT 1530
MIAMI BEACH, FL 33140 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name GURLAVIE, ALON OMRI
Address 5 HABARZEL STREET
City-State-Zip: TEL AVIV IL 69710-02

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALON OMRI GUR LAVIE

01/20/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED

DOCUMENT# L17000216316

Entity Name: INSIGHT ANALYSIS AND RESEARCH LLC

Feb 03, 2021
Secretary of State
1852141293CC

Current Principal Place of Business:

13727 SW 152 STREET
UNIT 715
MIAMI, FL 33177

Current Mailing Address:

13727 SW 152 STREET
UNIT 715
MIAMI, FL 33177 US

FEI Number: 82-3194031

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SRSL MANAGEMENT, INC
4101 PINE TREE DRIVE
UNIT 1530
MIAMI BEACH, FL 33140 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name GURLAVIE, ALON OMRI
Address 5 HABARZEL STREET
City-State-Zip: TEL AVIV IL 69710-02

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GURLAVIE, ALON OMRI

MANAGER

02/03/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED

DOCUMENT# L17000216316

Entity Name: INSIGHT ANALYSIS AND RESEARCH LLC

Jan 26, 2022
Secretary of State
4418394060CC

Current Principal Place of Business:

13727 SW 152 STREET
UNIT 715
MIAMI, FL 33177

Current Mailing Address:

13727 SW 152 STREET
UNIT 715
MIAMI, FL 33177 US

FEI Number: 82-3194031

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SRSL MANAGEMENT, INC
4101 PINE TREE DRIVE
UNIT 1530
MIAMI BEACH, FL 33140 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name GURLAVIE, ALON OMRI
Address 5 HABARZEL STREET
City-State-Zip: TEL AVIV IL 69710-02

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALON OMRI GUR LAVIE

01/26/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date